

JC13 Rec'd PCT/PTO 22 APR 2009

## Application Data Sheet

### Application Information

Application number:	Not yet assigned
Filing Date:	Herewith
Application Type:	Regular
Subject Matter:	Utility
Suggested Classification:	
Suggested Group Art Unit:	
CD-ROM or CD-R:	None
Number of CD Disks:	
Number of copies of CDs:	
Sequence Submission?	
Computer Readable Form (CRF)?	
Number of Copies of CFR:	
Title:	PRODUCTION OF VANILLIN IN MICROBIAL CELLS
Attorney Docket Number:	RUCC-0064
Request for Early Publication:	No
Request for Non-Publication:	No
Suggested Drawing Figure:	2
Total Drawing Sheets:	2
Small Entity?:	Yes
Latin name:	
Variety denomination name:	
Petition included?:	No
Petition Type:	
Licensed US Govt. Agency:	
Contract or Grant Numbers:	
Secrecy Order in Parent Appl.?:	No

## Applicant Information

**Applicant Authority Type:** Inventor  
**Primary Citizenship Country:** United States of America  
**Status:** Full Capacity  
**Given Name:** Daphna  
**Middle Name:** J.  
**Family Name:** Havkin-Frenkel  
**Name Suffix:**  
**City of Residence:** North Brunswick  
**State or Province of Residence:** New Jersey  
**Country of Residence:** United States of America  
**Street of mailing address:** 772 Cranbury Crossroad  
**City of mailing address:** North Brunswick  
**State or Province of mailing address:** New Jersey  
**Country of mailing address:** United States of America  
**Postal or Zip Code of mailing address:** 08902-2204

**Applicant Authority Type:** Inventor  
**Primary Citizenship Country:** United States of America  
**Status:** Full Capacity  
**Given Name:** Gerben  
**Middle Name:**  
**Family Name:** Zylstra  
**Name Suffix:**  
**City of Residence:** Roosevelt  
**State or Province of Residence:** New Jersey  
**Country of Residence:** United States of America  
**Street of mailing address:** 32 Lake Drive, P.O. Box 632  
**City of mailing address:** Roosevelt  
**State or Province of mailing address:** New Jersey  
**Country of mailing address:** United States of America  
**Postal or Zip Code of mailing address:** 08555-0632

**Applicant Authority Type:** Inventor  
**Primary Citizenship Country:** United States of America  
**Status:** Full Capacity  
**Given Name:** Chaim  
**Middle Name:**  
**Family Name:** Frenkel  
**Name Suffix:**  
**City of Residence:** North Brunswick  
**State or Province of Residence:** New Jersey  
**Country of Residence:** United States of America  
**Street of mailing address:** 772 Cranbury Crossroad  
**City of mailing address:** North Brunswick  
**State or Province of mailing address:** New Jersey  
**Country of mailing address:** United States of America  
**Postal or Zip Code of mailing address:** 08902-2204

**Applicant Authority Type:** Inventor  
**Primary Citizenship Country:** United States of America  
**Status:** Full Capacity  
**Given Name:** Faith  
**Middle Name:**  
**Family Name:** Belanger  
**Name Suffix:**  
**City of Residence:** East Brunswick  
**State or Province of Residence:** New Jersey  
**Country of Residence:** United States of America  
**Street of mailing address:** 3 Agate Road  
**City of mailing address:** East Brunswick  
**State or Province of mailing address:** New Jersey  
**Country of mailing address:** United States of America  
**Postal or Zip Code of mailing address:** 08816

## **Correspondence Information**

**Correspondence Customer No.:** 23377

**Name:**

**Street of Mailing Address:**

**City of Mailing Address:**

**State or Province of Mailing Address:**

**Country of Mailing Address:**

**Postal or Zip Code of Mailing Address:**

**Phone number:**

**Fax number:**

## **Representative Information**

**Representative Customer No.:** 23377

## **Domestic Priority Information**

<b>Application:</b>	<b>Continuity Type:</b>	<b>Parent Application:</b>	<b>Parent Filing Date:</b>
This application	An application claiming the benefit under 35 USC 119(e)	60/412,649	October 23, 2002

## **Foreign Priority Information**

<b>Country:</b>	<b>Application No.:</b>	<b>Filing Date:</b>	<b>Priority Claimed:</b>
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## **Assignee Information**

**Assignee name:**

**Street of mailing address:**

**City of mailing address:**

**State or Province of mailing address:**

**Country of mailing address:**

**Postal or Zip Code of mailing address:**